

began to swell rapidly, and to grow red, and the inflammation extended by degrees to the palm and back of the hand. On the fourth day, the pain was pulsatile and severe; he could not sleep; had great thirst; skin hot, and pulse frequent; the axillary glands were swollen but indolent. Stupor, leeches, poultices, opiates, mercurial frictions, were in their turn tried without advantage. It then occurred to M. Henroz to try compression of the brachial artery, which he did immediately with his thumb; instantly, the severe pain which he had endured for five days ceased, as if by magic, and he was able, without the slightest uneasiness, to put his hand into any position he pleased, and even the redness disappeared completely. However, as it was impossible to maintain the pressure in this manner for any length of time, he contrived an instrument for the purpose, so simple in its construction as perhaps to make it a valuable aid in such cases in the country, where more perfect ones could not be readily had. It was applied on the brachial artery, and the same good effects immediately followed as when compression was made with the thumb; it was left on for three hours, during which the pain in the hand did not recur for an instant; it was pale and cool, and the swelling had diminished. Fearing that a longer interruption to the circulation might produce ill consequences, M. Henroz suspended the compression for three-quarters of an hour. The pain returned; pressure was again made, but this time it was on the ulnar not the brachial artery, and the symptoms were as suddenly relieved as in the former case. Compression on the artery was thus continued from half-past twelve at noon until five o'clock in the evening, as well as the palm and dorsum of the hand with firm compresses of wadding, at which time the tumefaction of the hand and finger was permanently reduced, as also the tenderness; the symptoms of reaction had ceased, and there were no longer pain or fever. In the evening, pressure was again made and continued all night; the next day the cure was complete.

The same treatment was employed by M. Henroz with the same result on a young girl who had a very severe whitlow; in this case, in which the affection was eight days progressing, the pain left the part the instant the compression was applied, and the cure was complete in thirty-six hours.—*Journal de Médecine*.

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30. *Treatment of Gonorrhœa by Vinum Colchici*.—Dr. FICHMUS, of Dresden, confirms the opinion formed by EISENMANN, of the value of vinum colchici in gonorrhœa. He gives from twenty-five to thirty drops three times a day, combined with tincture opii, enjoining at the same time a low diet, warm bath, &c. These means he has found attended with unprecedented success in the treatment of gonorrhœa, and other inflammatory discharges from the urethra in males and from the vagina and uterus in females. The details of ten cases are given in illustration.—*Med. Gaz.*, from *Casper's Wochenschrift*, Aug. 26, 1848.

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31. *Case of Exfoliation of the Anterior Arch of the Atlas*. (Proceedings Royal Med. and Chirurg. Soc.) By ROBERT WADE, Esq.—The subject of this affection (aged thirty-five) first came under the author's notice at the Westminster Dispensary, in October, 1845. He then had a large, sloughy ulcer occupying the back of the pharynx, at the centre of which dead bone could be felt with a probe. He had previously suffered from extensive exfoliation of the upper jaw, and lost one of the spongy bones. Twelve years had elapsed since he had primary venereal disease, for which he was salivated, and was again subjected to the influence of mercury, by fumigations, for ulcerated throat. A course of iodide of potassium in sarsaparilla re-established his health for a time, but his throat again became sore two years afterwards. The same treatment was resorted to repeatedly with varying success. Latterly, he had suffered from pain in the neck, and from attacks of muscular rigidity in the same part. In one of these spasmodic attacks he had been alarmed by feeling something give way in the back of his neck, "with a loud crack, like the report of a pistol." On looking into the mouth, some coagulated blood was seen adhering to the ulcer. After this, the spasmodic attacks became less frequent and severe; and at the expiration of five months, the author observed a small portion of bone project-

ing into the pharynx, and, with very little difficulty, removed the greater part of the anterior arch of the atlas, with the entire articulating surface of the odontoid process of the axis. Caution was enjoined for a time, and the patient was enabled to resume his usual occupations in three months; the throat, however, has continued, from time to time, to be subject to attacks of ulceration. The power of rotating the head is now nearly perfect, but he has a catching pain at the back of the neck when he attempts to bend his head forwards.

MR. PRESCOTT HEWETT brought forward two preparations, which had reference to the paper which had just been read. These preparations were presented to the pathological museum of St. George's Hospital, in 1835, by Mr. Keate, who removed them, in 1810, from a man who had been affected with syphilis, and had taken large quantities of mercury. One of these preparations was a large exfoliation from the anterior part of the atlas, on which might be detected a small portion of the articulating surface for the odontoid process. This portion was perfectly smooth, and of the size of a split pea; the remainder of the bone was rough, and consisted only of about two-thirds of the thickness of the anterior arch of this vertebra; it measured an inch in length. The other preparation, which was taken from the same patient, consisted of an extensive exfoliation from the basilar surface of the occipital, including the luxated edge of that bone. After the removal of these pieces of bone, as well as exfoliations from other parts, the patient recovered his former health and strength. The details of this case were published by Mr. Keate in the *Medical Gazette* for 1835.

MR. WADE replied, in answer to a question from the president, that his patient retained, unimpaired, the power of rotating the head, but that it could only be bent forward to a very slight extent, not more than an inch. With regard to the case mentioned by Mr. Hewett, as having occurred at St. George's Hospital, in 1810, although, in some respects, resembling his own, there was this important difference, that in Mr. Hewett's there had been exfoliation of a part only of the anterior arch of the atlas, with but a portion of the articulating surface for the odontoid process; so that, in fact, some degree of bony support had still remained in front of that process. Mr. Wade believed that the case brought by him before the Society was the only one recorded in which exfoliation of the whole of the anterior arch of the atlas, with the entire articulating surface for the odontoid process of the axis, had occurred, affording a satisfactory proof that the transverse ligament has sufficient strength to retain that process in its place.—*Lancet*, Feb. 24.

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32. *New Variety of Luxation of the Humerus.* By M. MALGAIGNE.—A man, æt. 63, presented himself to M. Malgaigne, 31st of October, with a luxation of the humerus, which had occurred on the 16th of the preceding August; and the subject being a thin one, he was enabled to convince himself that it was a variety of the accident of which he knew of no other example. The man had been pitched to a distance from the top of a high wagon on to the ground, and had fallen on his shoulder, the arm being at the same time compressed against the trunk. A careful examination showed that the head of the bone had been carried upwards and forwards above the acromio-coracoid ligament and the coracoid process, which was so concealed by the head of the bone as not to be felt. The exact seat of the head was on the acromio-coracoid ligament, anteriorly and superiorly to the coracoid process; so that it might be termed the *supra-coracoid* luxation of the humerus. It was irreducible at so remote a period.—*Brit. & For. Med.-Chir. Rev.*, from *Rev. Méd. Chir.*, tom. v. p. 30.

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33. *Staphyloraphy.*—M. GERDY exhibited to the National Academy of Medicine a lad, fifteen years of age, on whom he had performed the operation of staphyloraphy, and whose pronunciation was entirely re-established. The cleft-palate in this patient, he stated, was so large, that the thumb could not cover the opening; there was no separation of the bone. Pronunciation was painful, and very imperfect. The fault of pronunciation was principally on the consonants, especially on the c, s, j, ch, n, b; in fact, the whole of the consonants were very much altered from the air escaping by the nostrils. The sounds were so very confused, that the person could hardly be understood. At present,